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Improving access to psychological therapies (IAPT) for people with bipolar disorder: Summary of outcomes from the IAPT demonstration site

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## ACCEPTED MANUSCRIPT

Improving Access to Psychological Therapies (IAPT) for People with Bipolar disorder:

Summary of outcomes from the IAPT demonstration site

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#### **ABSTRACT**

Access to structured psychological therapy recommended for bipolar disorder (BD) is poor. The UK NHS Improving Access to Psychological Therapies initiative commissioned a demonstration site for BD to explore the outcomes of routine delivery of psychological therapy in clinical practice, which this report summarises.

All clinically diagnosed patients with BD who wanted a psychological intervention and were not in acute mood episode were eligible. Patients were offered a 10-session group intervention (Mood on Track) which delivered NICE congruent care. Outcomes were evaluated using an open (uncontrolled), pre-post design.

Access to psychological therapy increased compared to preceding 6 years by 54%. 202 people began treatment; 81% completed > 5 sessions; median 9 sessions (range 6-11). Pre-post outcomes included personal recovery (primary outcome), quality of life, work and social functioning, mood and anxiety symptoms (secondary outcomes). Personal recovery significantly improved from pre to post-therapy; medium effect-size (d=.52). Secondary outcomes all improved (except mania symptoms) with smaller effect sizes (d=. 20-.39). Patient satisfaction was high. Use of crisis services, and acute admissions were reduced compared to pre-treatment.

It is possible to deliver group psychological therapy for bipolar disorder in a routine NHS setting. Improvements were observed in personal recovery, symptoms and wider functioning with high patient satisfaction and reduced service use.

#### Highlights

• We summarised outcomes of delivery of psychological therapy for bipolar disorder in clinical practice

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